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	APPLICATION	First Inventor	Jackowski et al	
TRAN	NSMITTAL	Title DIAGNOSIS AND TREATMENT OF DEMEN		
(Only for new nonprovisiona	al applications under 37 CFR 1.53(b))	Express Mail Label N	o. EU001993400US	
APPLICAT	TION ELEMENTS	ADDRESS TO:	Assistant Commissioner for Patents Box Patent Application	
	erning utility patent application contents.		Washington, DC 20231	
1. Submit an original and a du		CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
2. Applicant claims sm See 37 CFR 1.27.	nall entity status.	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
3. Specification (preferred arrangement s	[Total Pages 33]	Computer Readable Form (CRF)		
- Descriptive title o	- Descriptive title of the invention b. Specification Sequence Listing on:			
 Statement Regar 	oss Reference to Related Applications atement Regarding Fed sponsored R & D i. CD-ROM or CD-R (2 copies); or		ROM or CD-R (2 copies); or	
- Reference to sequence listing, a table, or a computer program listing appendix			r	
- Background of th - Brief Summary o	ne Invention		verifying identity of above copies	
 Brief Description 	of the Drawings (if filed)		ING APPLICATION PARTS	
Detailed DescriptClaim(s)Abstract of the D		37 CFR 3.73	Papers (cover sheet & document(s)) (b) Statement Power of Attorney	
4. Drawing(s) (35 U.S	S.C. 113) [Total Sheets 2]	11. English Tran	slation Document (if applicable)	
5. Oath or Declaration	[Total Pages]	12. Information I Statement (II	Disclosure Copies of IDS Citations	
a. Whysicana	ed (original or copy)	13. Preliminary		
b. (for continuation	orior application (37 CFR 1.63 (d)) on/divisional with Box 18 completed)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
	ON OF INVENTOR(S)	15. Certified Con	py of Priority Document(s) iority is claimed)	
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1 63(d)(2) and 1 33(b)		16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35		
6. Application Data Sheet. See 37 CFR 1.76		or its equiva	lent.	
	CATION, check appropriate box, and sup	ply the requisite information l	below and in a preliminary amendment,	
or in an Application Data Shee	Divisional Continuation-in-part (CIP)	of prior application No.		
Prior application information	ExaminerNAL APPS only. The entire disclosure of the p	Group Art Unit	ath or declaration is supplied under	
Box 5b, is considered a part of the	e disclosure of the accompanying continuation	or divisional application and is he	ereby incorporated by reference	
The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS				
Customer Number or Bar Cod	de Label (Insert-Customer No. or Atlacti be	or [ar code label here)	Correspondence address below	
Name	Michael A. Slavin			
	McHale & Slavin, P.A.			
Address	MAO PGA Roulevard Suite	402		

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

Complete if Known			
Application Number			
Filing Date			
First Named Inventor	Jackowski		
Examiner Name			
Group Art Unit			
Attorney Docket No.	2132.113		

METHOD OF PAYMENT	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES			
indicated fees and credit any overpayments to Deposit	Large Small			
Account	Entity Entity Fee Fee Fee Fee Fee Description			
Number	Fee Fee Fee Fee Description	Fee Paid		
Deposit Account Name	105 130 205 65 Surcharge - late filing fee or oath			
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet			
Applicant claims small entity status.	139 130 139 130 Non-English specification			
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination			
2. Payment Enclosed: NO FEE SUBMITTED	112 920* 112 920* Requesting publication of SIR prior to			
Check Credit card Money Other	Examiner action			
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action			
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month			
Large Entity Small Entity	116 400 216 200 Extension for reply within second month			
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920 217 460 Extension for reply within third month			
101 740 201 370 Utility filing fee 370.00	118 1,440 218 720 Extension for reply within fourth month			
106 330 206 165 Design filing fee	128 1,960 228 980 Extension for reply within fifth month			
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal			
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal			
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing			
SUBTOTAL (1) (\$) 370.00	138 1,510 138 1,510 Petition to institute a public use proceeding			
	140 110 240 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES Fee from	141 1,280 241 640 Petition to revive - unintentional			
Extra Claims below Fee Paid	142 1,280 242 640 Utility issue fee (or reissue)			
Total Claims	143 460 243 230 Design issue fee			
Claims	144 620 244 310 Plant issue fee			
Multiple Dependent	122 130 122 130 Petitions to the Commissioner			
Large Entity Small Entity	123 50 123 50 Processing fee under 37 CFR 1 17(q)			
Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt			
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)			
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a))			
104 280 204 140 Multiple dependent claim, if not paid	149 740 249 370 For each additional invention to be			
109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))			
110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)			
and over original patent	169 900 169 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) 454.00	Other fee (specify)			
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)			

SUBMITTED BY			Complete (if applicable)
Name (Print/Type)	Michael/A Mavin	Registration No. (Attorney/Agent) 34,016	Telephone 561-625-6575
Signature	MANA		Date 12/26/01

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